Doc Code: PET.POA.WDRW

REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Document Description: Petition to withdraw attorney or agent (SB83)

PTO/SB/83 (11-08) Approved for use through 11/30/2011. OMB 0651-0035 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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	Application Number	10/579,536				
	Filing Date	5/16/2006				
	First Named Inventor	Mariono				
	Art Unit					
	Examiner Name					
	Attorney Docket Number	HAMM0011UPCTUS	_			

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450										
Please withdraw me as attorney or agent for the above identified patent application, and										
all the practitioners of record;										
the practitioners (with registration numbers) of record listed on the attached paper(s); or										
the practitioners of record associated with Customer Number:31518										
NOTE: The immediately preceding box should only be marked when the practitioners were appointed using the listed Customer Number.										
The reason(s) for this request are those described in 37 CFR:										
10.40(b)(1) 10.40(b)(2) 10.40(b)(3) 10.40(b)(4)										
10.40(c)(1)(i) 10.40(c)(1)(ii) 10.40(c)(1)(iii) 10.40(c)(1)(iii)										
10.40(c)(1)(v) 10.40(c)(1)(vi) 10.40(c)(2) 10.40(c)(3)										
10.40(c)(4) 10.40(c)(5) 10.40(c)(6) Please explain below:										
Certifications Check each box below that is factually correct. WARNING: If a box is left unchecked, the request will likely not										
be approved.										
We have given reasonable notice to the client, prior to the expiration of the response period, that the practitioner(s) intend to withdraw from employment.										
2. We have delivered to the client or a duly authorized representative of the client all papers and property (including funds) to which the client is entitled.										
3. We have notified the client of any responses that may be due and the time frame within which the client must respond.										
Please provide an explanation, if necessary:										
[Page 1 of 2]										

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Complete the following section only when the correspondence address will change. Changes of address will only be accepted to an inventor or an assignee that has properly made itself of record pursuant to 37 CFR 3.71.												
Change the correspondence address and direct all future correspondence to:												
A The address of the inventor or assignee associated with Customer Number												
OR												
B. Inventor or Assignee name Fabio Marioni												
Address Media Lario, SRL, 23842 Bosisio Parini,												
City		State (LC)	П	Zip			Country Italy					
Telephone 011 39 (031) 867 111 E			Ema	Email								
I am authorized to sign on behalf of myself and all withdrawing practitioners.												
Signature	Signature /RichardNeifeld#35,299/											
Name	RICHARD NEIF		Registration No. 35,299			5,299						
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Date 11/30/2009				Telephone No. 1-703-415-0012								
NOTE: Withdrawal is effective when approved rather than when received.												

[Page 2 of 2]
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